



**Shalom Hill Farm
Cross Lutheran Youth Ministry Trip
August 7th - 10th, 2017
Registration Form**

Participant Name _____ Date of Birth _____

Address _____ City _____ Zip _____

Phone _____

Parent Name _____ Phone _____

Parent Name _____ Phone _____

_____ Yes, I plan to be part of the Shalom Hill Farm Trip and here is my downpayment of \$50

_____ Yes, I'd like to be part of the Shalom Hill Farm Trip and my down payment will come by _____ (date please)

_____ (please initial here) I agree to attend three of the four monthly trip meetings so that I can meet the people I will be traveling and spending the week with.

I agree to support my child in being part of this summer trip and will do my best to be sure he/she/they get the three monthly trip meetings in preparation for this trip.

Parent Signature

Date

Please photo copy as needed - one copy per participant please